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Bib Data Sheet

CONFIRMATION NO. 7515

SERIAL NUMBER 10/075,033	FILING DATE 02/12/2002 RULE	CLASS 705	GROUP ART UNIT 2161	ATTORNEY DOCKET NO.
APPLICANTS Alvin Koningsberg, Brooklyn, NY; <i>ML</i>				
** CONTINUING DATA ***** <i>ML</i>				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY ** ** 03/07/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>ML</i>		STATE OR COUNTRY NY	SHEETS DRAWING	TOTAL CLAIMS 16
Verified and Acknowledged Examiner's Signature <i>ML</i> Initials <i>ML</i>		INDEPENDENT CLAIMS 2		
ADDRESS Steven Horowitz Counselor At Law Suite 700 295 Madison Avenue New York, NY 10017 <i>ML</i>				
TITLE Method of operating a savings plan for health care services <i>ML</i>				
FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	